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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		<b>Attorney Docket No.</b> 00862.023401 <b>First Named Inventor or Application Identifier</b> TOMOCHIKA MURAKAMI, ET AL. <b>Express Mail Label No.</b> 10758023			
<b>APPLICATION ELEMENTS</b> See MPEP chapter 600 concerning utility patent application contents.		<b>ADDRESS TO:</b> Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450			
1. <input checked="" type="checkbox"/> Fee Transmittal Form <small>(Submit an original, and a duplicate for fee processing)</small>		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program ( <i>Appendix</i> )			
2. <input type="checkbox"/> Applicant claims small entity status. <small>See 37 CFR 1.27.</small>		8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i>			
3. <input checked="" type="checkbox"/> Specification <b>Total Pages</b> 112		a. <input type="checkbox"/> Computer Readable Form (CRF)			
4. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) <b>Total Sheets</b> 23		b. Specification Sequence Listing on:			
5. <input checked="" type="checkbox"/> Oath or Declaration <b>Total Pages</b> 2		i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper			
a. <input type="checkbox"/> Newly executed (original or copy)		c. <input type="checkbox"/> Statements verifying identity of above copies			
b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 17 completed)</i>					
i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed Statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).					
6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76					
<b>ACCOMPANYING APPLICATION PARTS</b>					
9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))					
10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <i>(when there is an assignee)</i> <input type="checkbox"/> Power of Attorney					
11. <input type="checkbox"/> English Translation Document ( <i>if applicable</i> )					
12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations					
13. <input type="checkbox"/> Preliminary Amendment					
14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i>					
15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i>					
16. <input type="checkbox"/> Other: _____ _____ _____					
17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:  Prior application information: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No. ____/_____ Examiner _____ Group/Art Unit: _____					
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.					
<b>18. CORRESPONDENCE ADDRESS</b>					
<input checked="" type="checkbox"/> Customer Number or Bar Code Label		05514 (Insert Customer No. or Attach bar code label here)			
<input type="checkbox"/> or <input type="checkbox"/> Correspondence address below					
<b>NAME</b>					
<b>Address</b>					
City		State		Zip Code	
Country				Fax	

CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1.16(c))	20-20 =	0	X \$ 18.00 =	\$0.00
	INDEPENDENT CLAIMS (37 CFR 1.16(b))	8-3 =	5	X \$ 86.00 =	\$430.00
	MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.16(d))			\$290.00 =	\$0.00
				BASIC FEE (37 CFR 1.16(a))	\$770.00
				Total of above Calculations =	\$1200.00
	Reduction by 50% for filing by small entity (Note 37 CFR 1.9, 1.27, 1.28).				
				TOTAL =	\$1200.00

19. Small entity status

- a.  A small entity statement is enclosed
- b.  A small entity statement was filed in the prior nonprovisional application and such status is still proper and desired.
- c.  Is no longer claimed.

20.  A check in the amount of \$ 1200.00 to cover the filing fee is enclosed.

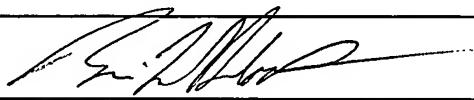
21.  A check in the amount of \$ 40.00 to cover the recordal fee is enclosed.

22. The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No. 06-1205:

- a.  Fees required under 37 CFR 1.16.
- b.  Fees required under 37 CFR 1.17.
- c.  Fees required under 37 CFR 1.18.

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED**

NAME | Brian L. Klock - Reg. No. 36,570

SIGNATURE | 

DATE | January 16, 2004

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